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## **Impact of ticagrelor monotherapy on two-year clinical outcomes in patients with long stenting: a post hoc analysis of the GLOBAL LEADERS trial**

Takahashi, Kuniaki ; Chichareon, Ply ; Modolo, Rodrigo ; Kogame, Norihiro ; Chang, Chun Chin ; Tomaniak, Mariusz ; Moschovitis, Aris ; Curzen, Nick ; Haude, Michael ; Jung, Werner ; Holmvang, Lene ; Garg, Scot ; Tijssen, Jan G P ; Wykrzykowska, Joanna J ; de Winter, Robbert J ; Hamm, Christian ; Steg, Philippe Gabriel ; Stoll, Hans-Peter ; Onuma, Yoshinobu ; Valgimigli, Marco ; Vranckx, Pascal ; Windecker, Stephan ; Serruys, Patrick W

**Abstract:** **Aims:** The aim of this study was to evaluate the impact of a novel antiplatelet regimen in patients with increasing total stent length (TSL). **Methods and results:** This is a post hoc analysis of the GLOBAL LEADERS trial, a prospective, multicentre, open-label, randomised trial, investigating the impact of the experimental strategy (one-month dual antiplatelet therapy [DAPT] followed by 23-month ticagrelor monotherapy) versus the reference regimen (12-month DAPT followed by 12-month aspirin monotherapy) in patients with a Biolimus A9-eluting stent (BES). The primary endpoint was the composite of all-cause death and new Q-wave myocardial infarction (MI), and the secondary endpoint was Bleeding Academic Research Consortium (BARC) type 3 or 5 bleeding at two years. To investigate the association between total stent length and outcomes, groups were compared in quartiles according to TSL; the fourth quartile group was at significantly higher ischaemic risk at two years. In that stratum (TSL ≥ 46 mm), the experimental strategy significantly reduced the risk of the primary endpoint (hazard ratio [HR] 0.67, 95% confidence interval [CI]: 0.49-0.90; pinteraction=0.043), while demonstrating a similar risk of BARC type 3 or 5 bleeding (HR 0.99, 95% CI: 0.66-1.49; pinteraction=0.975). **Conclusions:** Ticagrelor monotherapy could potentially balance ischaemic and bleeding risks, thereby achieving a net clinical benefit in patients with a TSL ≥ 46 mm with a BES.

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# Impact of ticagrelor monotherapy on two-year clinical outcomes in patients with long stenting: a post hoc analysis of the GLOBAL LEADERS trial

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**Aims:** The aim of this study was to evaluate the impact of a novel antiplatelet regimen in patients with increasing total stent length (TSL).

**Methods and results:** This is a post hoc analysis of the GLOBAL LEADERS trial, a prospective, multicentre, open-label, randomised trial, investigating the impact of the experimental strategy (one-month dual antiplatelet therapy [DAPT] followed by 23-month ticagrelor monotherapy) versus the reference regimen (12-month DAPT followed by 12-month aspirin monotherapy) in patients with a Biolimus A9-eluting stent (BES). The primary endpoint was the composite of all-cause death and new Q-wave myocardial infarction (MI), and the secondary endpoint was Bleeding Academic Research Consortium (BARC) type 3 or 5 bleeding at two years. To investigate the association between total stent length and outcomes, groups were compared in quartiles according to TSL; the fourth quartile group was at significantly higher ischaemic risk at two years. In that stratum (TSL  $\geq 46$  mm), the experimental strategy significantly reduced the risk of the primary endpoint (hazard ratio [HR] 0.67, 95% confidence interval [CI]: 0.49-0.90;  $p=0.007$ ), while demonstrating a similar risk of BARC type 3 or 5 bleeding (HR 0.99, 95% CI: 0.68-1.44;  $p=0.98$ ).



0.66-1.49;  $p_{\text{interaction}}=0.975$ ).

**Conclusions:** Ticagrelor monotherapy could potentially balance ischaemic and bleeding risks, thereby achieving a net clinical benefit in patients with a TSL  $\geq 46$  mm with a BES.



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